

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006
Community Based Residential Facility
CLASS AA (AMBULATORY)

STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

Facility Information

Facility Name: NORTHPORT GROUP HOME (110130)

Address: 1602 NORTHPORT DR, MADISON, WI 53704

License Status: REGULAR

Licensed/Certified/Registered 12/31/1982

Regional Office: SOUTHERN REGION (MADISON), (608) 243-2370

Survey History

Survey ID: 0092749 **End Date:** 06/07/2004 **Type:** ABBREVIATED **Purpose:** SURVEY

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10008011 Served 06/16/2004

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
83.21(4)(w)	SAFE ENVIRONMENT		
83.21(5)(a)1	RIGHT TO FILE A GRIEVANCE		
83.32(2)(c)1	ANNUAL EVALUATION-PARTICIPATION		
83.33(3)(e)5	MEDICAL RECORD DOCUMENTATION		

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006
Community Based Residential Facility
CLASS AA (AMBULATORY)

STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

Enforcement History

Date: 06/15/2004 SOD #10008011 Appealed: No

Sanctions

FORFEITURE---83.21(4)(4)
FORFEITURE---83.21(5)(a)1
FORFEITURE---83.32(2)(c)1

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.